

NEW YORK STATE SECURITY BREACH REPORTING FORM

Pursuant to the Information Security Breach and Notification Act

(General Business Law §899-aa)

Name and address of Entity that owns or licenses the computerized data that was subject to the breach:

Hymowitz Law Group, PLLC

Street Address: 2080 Coney Island Ave.

City: Brooklyn

State: NY

Zip Code: 11223

Submitted by: Daniel Hymowitz **Title:** Member **Dated:** November 20, 2013

Firm Name (if other than entity):

Telephone: 718-807-9900

Email: mail@hymowitzlaw.com

Relationship to Entity whose information was compromised: Member

Type of Organization (please select one): ☐ Governmental Entity in New York State; ☐ Other Governmental Entity;
☐ Educational; ☐ Health Care; ☐ Financial Services; ☒ Other Commercial; or ☐ Not-for-profit.

Number of Persons Affected:

Total (Including NYS residents): 25 NYS Residents: 25

If the number of NYS residents exceeds 5,000, have the consumer reporting agencies been notified? ☐ Yes ☒ No

Dates: Breach Occurred: 11/15/2013 Breach Discovered: 11/15/2013 Consumer Notification: 11/18 - 11/20/2013

Description of Breach (please select all that apply):

☒ Loss or theft of device or media (e.g., computer, laptop, external hard drive, thumb drive, CD, tape);

☐ Internal system breach; ☐ Insider wrongdoing; ☐ External system breach (e.g., hacking);

☐ Inadvertent disclosure; ☐ Other specify: _____

Information Acquired: Name or other personal identifier in combination with (please select all that apply):

☒ Social Security Number

☒ Driver's license number or non-driver identification card number

☐ Financial account number or credit or debit card number, in combination with the security code, access code, password, or PIN for the account

Manner of Notification to Affected Persons - ATTACH A COPY OF THE TEMPLATE OF THE NOTICE TO AFFECTED NYS RESIDENTS:

☒ Written ☐ Electronic ☒ Telephone ☐ Substitute notice

List dates of any previous (within 12 months) breach notifications: _____

Identify Theft Protection Service Offered: ☐ Yes ☒ No

Duration: _____ Provider: _____

Brief Description of Service: _____

NEW YORK STATE SECURITY BREACH REPORTING FORM
 Pursuant to the Information Security Breach and Notification Act
 (General Business Law §89-aa)

Name and address of Entity that owns or licenses the compromised data that was subject to the breach: Hyman & Hyman, LLP Street Address: 3080 Convent Island Ave. City: Brooklyn State: NY Zip Code: 11223	
Relationship to Entity whose information was compromised: Member Telephone: 718-807-8800 Email: mail@hymanlaw.com Title: Member Date: November 20, 2013	
Type of Organization (please select one): <input type="checkbox"/> Governmental Entity in New York State <input type="checkbox"/> Other Governmental Entity <input type="checkbox"/> Educational <input type="checkbox"/> Health Care <input checked="" type="checkbox"/> Financial Services <input type="checkbox"/> Other Commercial <input type="checkbox"/> Not for-profit	
Total (including NYS residents): \$5 If the number of NYS residents exceeds 5,000, have the consumer reporting agencies been notified? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Number of Persons Affected: NYS Residents: \$5	
Date Breach Occurred: 11/20/13 Breach Detected: 11/20/13 Consumer Notification: 11/18 - 11/20/2013	
Description of Breach (please select all that apply): <input checked="" type="checkbox"/> Loss or theft of device or media (e.g., computer laptop, external hard drive, thumb drive, CD, tape) <input type="checkbox"/> Internal system breach <input type="checkbox"/> Breach of system (e.g., hacking) <input type="checkbox"/> Inadvertent disclosure <input type="checkbox"/> Other specify:	
Information Affected: Name or other personal identifier in combination with (please select all that apply): <input checked="" type="checkbox"/> Social Security Number <input checked="" type="checkbox"/> Driver's license number or non-driver identification card number <input type="checkbox"/> Financial account number or credit or debit card number in combination with the security code, access code, password, or PIN for the account	
Number of Affected Persons - ATTACH A COPY OF THE TEMPLATE OF THE NOTICE TO AFFECTED NYS RESIDENTS: <input checked="" type="checkbox"/> Written <input type="checkbox"/> Electronic <input checked="" type="checkbox"/> Telephone <input type="checkbox"/> Substitute notice List dates of any previous (within 12 months) breach notifications:	
Identify Third-Party Service Provider: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Brief Description of Service:	

HYMOWITZ LAW GROUP, PLLC
ATTORNEYS & COUNSELORS AT LAW

NEW YORK:

45 BROADWAY, 27TH FLOOR
NEW YORK, NEW YORK 10006
212.913.0401

BROOKLYN:

2080 CONEY ISLAND AVENUE
NEW YORK, NEW YORK 11223
718.807.9900 | F 866.521.6040

→→→→ KINDLY FORWARD ALL MAIL TO OUR BROOKLYN OFFICE ←←←←

Daniel Hymowitz, Esq.

November 18, 2013

Dear _____:

We are writing to inform you of a recent security incident at [name of organization]. This notification is sent pursuant to the New York State Information and Security Breach and Notification Act (General Business Law Section 899-aa or State Technology Law Section 208).

On November 14, 2013, a laptop computer of Hymowitz Law Group, PLLC was stolen in Florence, Italy. The local authorities were notified of the incident immediately. We do not know if the information on the laptop was actually accessed. We remain hopeful that the laptop will be recovered. The laptop had on it the Hymowitz Law Group client information including your personal information. Our review revealed that your personal information stored on the laptop included your **social security number**.

To protect yourself from the possibility of identity theft, we recommend that you immediately place a fraud alert on your credit files. A fraud alert conveys a special message to anyone requesting your credit report that you suspect you were a victim of fraud. When you or someone else attempts to open a credit account in your name, the lender should take measures to verify that you have authorized the request. A fraud alert should not stop you from using your existing credit cards or other accounts, but it may slow down your ability to get new credit. An initial fraud alert is valid for ninety (90) days. To place a fraud alert on your credit reports, contact one of the three major credit reporting agencies at the appropriate number listed below or via their website. One agency will notify the other two on your behalf. You will then receive letters from the agencies with instructions on how to obtain a free copy of your credit report from each.

- Equifax (888)766-0008 or www.fraudalert.equifax.com
- Experian (888) 397-3742 or www.experian.com
- TransUnion (800) 680-7289 or www.transunion.com

New York residents can also consider placing a Security Freeze on their credit reports. A Security Freeze prevents most potential creditors from viewing your credit reports and therefore, further restricts the opening of unauthorized accounts. For more information on placing a security freeze on your credit reports, please go to the New York Department of State Division of Consumer Protection website at <http://www.dos.ny.gov/consumerprotection>.

HYMOWITZ LAW GROUP, PLLC

To: _____

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When you receive a credit report from each agency, review the reports carefully. Look for accounts you did not open, inquiries from creditors that you did not initiate, and confirm that your personal information, such as home address and Social Security number, is accurate. If you see anything you do not understand or recognize, call the credit reporting agency at the telephone number on the report. You should also call your local police department and file a report of identity theft. Get and keep a copy of the police report because you may need to give copies to creditors to clear up your records or to access transaction records.

Even if you do not find signs of fraud on your credit reports, we recommend that you remain vigilant in reviewing your credit reports from the three major credit reporting agencies. You may obtain a free copy of your credit report once every 12 months by visiting www.annualcreditreport.com, calling toll-free 877-322-8228 or by completing an Annual Credit Request Form at: www.ftc.gov/bcp/menus/consumer/credit/rights.shtm and mailing to:

Annual Credit Report Request Service,
P.O. Box 1025281
Atlanta, GA 30348-5283

For more information on identity theft, you can visit the following websites:

New York Department of State Division of Consumer Protection:

<http://www.dos.ny.gov/consumerprotection>

NYS Attorney General at: <http://www.ag.ny.gov/home.html>

Federal Trade Commission at: www.ftc.gov/bcp/edu/microsites/idtheft/

We are truly sorry for this inconvenience. If there is anything Hymowitz Law Group can do to further assist you in this matter, please call us at 718-807-9900.